PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10743606

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			12		TCOIU	1111 2)	۱ ا			OR 1			
			1.5					RATE	FEE	-	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/3 minus 20=		* 0			X\$ 9=		OR	X\$18=		
<u> </u>	EPENDENT C			inus 3 =	0	0		X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1) (Column 2) (Column 3)							_	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
L	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDENT	CLAIM		!	+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE											ADDII. I EE		
_	•	CLAIMS		HIGH	EST		1 г		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!						
+145= OR +290= TOTAL OR TOTAL													
AD										OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<u>. </u>	=	╽┟	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
**	the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	20, enter "20."	Al	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					r foun	d in the app	ropriate box	in col	umn 1.		